## AMENDED IN ASSEMBLY MAY 6, 2003 AMENDED IN ASSEMBLY APRIL 10, 2003

CALIFORNIA LEGISLATURE—2003-04 REGULAR SESSION

## ASSEMBLY BILL

No. 1220

## Introduced by Assembly Member Berg (Principal coauthor: Assembly Member Cohn)

February 21, 2003

An act to add Section 104141 to the Health and Safety Code, relating to disease prevention.

## LEGISLATIVE COUNSEL'S DIGEST

AB 1220, as amended, Berg. Cardiovascular disease.

Existing law requires the State Department of Health Services to administer various programs related to disease prevention and health promotion, including a program for the control of high blood pressure.

This bill would create the Cardiovascular Disease and Stroke Prevention and Treatment Task Force within the department. The task force would be composed of 12 members, as specified, and would be required to perform a number of duties, including the creation of a Cardiovascular Disease and Stroke Prevention and Treatment State Master Plan. This bill would require the task force, by November 1, 2005, to submit the Master Plan master plan to the Legislature, the Governor, and the department. This bill would also make implementation of its provisions contingent upon the appropriation of funds in the annual Budget Act or other statute receipt of private funding.

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Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the following:
  - (a) Cardiovascular disease is the number one cause of death and disability nationally.
  - (b) Heart disease alone is the number one killer, and stroke is the number three killer, of Californians.
- (c) More people die each year of cardiovascular disease than of the next five leading causes of death combined.
- (d) This year the economic burden on the nation due to 10 cardiovascular diseases and stroke is estimated to be over three hundred and fifty billion dollars (\$350,000,000,000).
  - (e) A cardiovascular disease and stroke prevention and treatment state master plan is needed to reduce the morbidity, mortality, and economic burden of cardiovascular disease and stroke in the state.
- SEC. 2. Section 104141 is added to the Health and Safety 16 17 Code, to read:
- 104141. (a) The Cardiovascular Disease and Stroke 18 Prevention and Treatment Task Force is hereby created in the 19 20 department.
- (b) The task force shall be comprised of 12 members, as follows, who have demonstrated interest in cardiovascular disease 22 23 or stroke:
- 24 (1) Three members appointed by the Speaker of the Assembly, 25 as follows:
  - (A) One member representing a volunteer health organization dedicated to research and prevention of cardiovascular disease and stroke.
- 29 (B) One practicing physician with expertise in research, prevention, or treatment of stroke victims. 30
  - (C) One hospital administrator.
- (2) Three members appointed by the Senate Committee on 32 Rules, as follows: 33
- (A) One representative of a population disproportionately 34 affected by cardiovascular disease and stroke.

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(B) One practicing physician with expertise in research, 1 prevention, or treatment of cardiovascular disease.

- (C) One representative of a health care organization.
- 4 (3) Six members appointed by the Governor, as follows:
  - (A) One heart disease survivor.
    - (B) One stroke survivor.
  - (C) One registered nurse.

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- (D) One representative of a local health department.
- (E) One member of a university facility with expertise in programs intended to reduce the rate of cardiovascular disease and 10 stroke.
  - (F) One registered dietitian with experience in population based programs.
  - (c) (1) Members of the task force shall be appointed on or before March 1, 2004.
  - (2) Members shall serve without compensation, but shall be reimbursed for necessary travel expenses incurred in the performance of task force duties.
  - (3) On or before June 1, 2004, the task force shall meet and establish operating procedures.
  - (4) A majority of the task force shall constitute a quorum for the transaction of business.
  - (5) The task force shall be headed by a chairperson, selected by the task force from among its members.
  - (d) The duties of the task force shall include, but not be limited to, all of the following:
  - (1) Creating a comprehensive Cardiovascular Disease and Stroke Prevention and Treatment State Master Plan that contains recommendations to the Legislature, the Governor, and the department. The master plan master plan shall address changes to existing law, regulations, programs, services, and policies, for the purpose of improving cardiovascular disease and stroke prevention and treatment in the state.
  - (2) Synthesizing existing information on the incidence and causes of cardiovascular disease and stroke deaths and risks to establish a profile of these deaths and risks in the state for the purpose of developing the master plan master plan.
- (3) Publicizing the profile of cardiovascular disease and stroke 38 deaths and risks and their preventability in the state.

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(4) Identifying priority strategies that are effective in preventing, controlling, and treating risks for cardiovascular disease and stroke.

- (5) Receiving and considering reports, data, and testimony from individuals, local health departments, community-based organizations, voluntary health organizations, and other public and private organizations statewide in order to assess opportunities for collaboration as well as to identify gaps in cardiovascular disease and stroke prevention and treatment in the state.
- (e) On or before November 1, 2005, the task force shall submit its plan to the Legislature, the Governor, and the department. Prior to issuing the plan, the task force may issue recommendations, as it deems necessary. Once the plan is submitted, the task force may revise and update the plan as necessary due to medical advances or other relevant information.
- (f) The department shall provide staff support to the task force, and may apply for, accept, and spend any grants and gifts from any source, public or private, to support the requirements of this section.
- (g) Implementation of this section shall be contingent upon funds appropriated in the annual Budget Act or other statute. the receipt of private funding.